## UTILITY PATENT APPLICATION TRANSMITTAL TRANSMITTAL

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Attorney Docket No.	35.C15321
First Name	d Inventor or Application Identifier
KATSUHISA OGAWA ET	AL.

T	(Only for new nonprovisional applications under 37 GFR 1.53(b))	Express Mail Label No.					
	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Commissioner for Patents  ADDRESS TO:  Box Patent Application Washington, DC 20231					
	Fee Transmittal Form     (Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)					
	2. Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
	3. X Specification Total Pages 105	a. Computer Readable Form (CRF)					
	4. X Drawing(s) (35 USC 113) Total Sheets 26	b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or					
	5. Oath or Declaration Total Pages	ii. paper					
	a. Newly executed (original or copy)	c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS					
	b. Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 17 completed)	g. Assignment Papers (cover sheet & document(s))					
	i. DELETION OF INVENTOR(S)  Signed Statement attached deleting inventor	10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney					
	named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	11 English Translation Document (if applicable)					
	6. X Application Data Sheet. See 37 CFR 1.76	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
		13. Preliminary Amendment  Return Receipt Postcard (MPEP 503)					
		(Should be specifically itemized)					
4		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
		16. Other:					
	17. If a CONTINUING APPLICATION, check appropriate box and su	pply the requisite information:					
	Continuation  Divisional  Continuation-in-part (CIP) of prior application No/  Prior application information:  Examiner  Group/Art Unit:						
	For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
	ye " " ( ) 0 000 / ' ' d	SPONDENCE ADDRESS 05514					
	X Customer Number or Bar Code Label  (Insert Obstomer No. or Attach bar code label here)  (Insert Obstomer No. or Attach bar code label here)  or Correspondence address below						
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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS	
un en Saulya	TOTAL CLAIMS (37 CFR 1.16(c))	40-20 =	20	X \$ 18.00 =	\$ 360.00	
	INDEPENDENT CLAIMS (37 CFR 1 16(b))	18-3 =	15	X \$ 80.00 =	\$ 1,200.00	
	MULTIPLE DEPENDENT	CLAIMS (if applicable) (37	CFR 1 16(d))	\$270.00 =	\$0	
nicentral 1				BASIC FEE (37 CFR 1.16(a))	\$ 710.00	
Total of above Calculations =				\$ 2,270.00		
Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).						
				TOTAL =	\$ 2,270.00	
The control of the co						
19. Small entity status						
a.	a. A small entity statement is enclosed					
b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.						
c.	ls no longe	er claimed.				
20.	0. X A check in the amount of \$ 2,270.00 to cover the filing fee is enclosed.					
A check in the amount of \$ to cover the recordal fee is enclosed.						
22. Th	The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:					
a.	X Fees requ	ired under 37 CFR 1.16.				
b.	X Fees requi	ired under 37 CFR 1.17.				
c.	Fees requ	ired under 37 CFR 1.18.				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Leonard P. Diana	
SIGNATURE	Z. 1 ) 3226	
DATE	4-23-01	

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